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Bib Data Sheet

CONFIRMATION NO. 6602

SERIAL NUMBER 10/629,241	FILING OR 371(c) DATE 07/29/2003 RULE	CLASS 359	GROUP ART UNIT 2873	ATTORNEY DOCKET NO. 080494-0141
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APPLICANTS

John Smithbaker, Riverton, WY;
 Brendon Weaver, Riverton, WY;
 Masashi Kato, Warabi City, JAPAN;
 Hiroaki Ishigaki, Warabi-City, JAPAN;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 10/25/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	WY	11	12	2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

26371

TITLE

MULTI-STEP LOCKING EYE CUP TWIST UP DEVICE

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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